

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000004937

FILED  
Mar 07, 2007  
Secretary of State

**Entity Name:** FLORIDA COMMUNITY PROPERTY MANAGEMENT, L.L.C.

**Current Principal Place of Business:**

8141 54TH AVENUE NORTH  
ST. PETERSBURG, FL 33709

**New Principal Place of Business:**

**Current Mailing Address:**

1021 OAK STREET  
JACKSONVILLE, FL 32204

**New Mailing Address:**

**FEI Number:** 03-0393553

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SURFACE, FRANK J JR.  
1021 OAK STREET  
JACKSONVILLE, FL 32204 US

**Name and Address of New Registered Agent:**

MORTGAGE ADVISORS, INC.  
1021 OAK STREET  
JACKSONVILLE, FL 32204 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: J FRANK SURFACE JR

03/07/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: FOLEY, SEAN M  
Address: 8141 54TH AVENUE NORTH  
City-St-Zip: ST. PETERSBURG, FL 33709 US

Title: MGR ( ) Delete  
Name: SURFACE, JR., J. FRANK  
Address: 1021 OAK STREET  
City-St-Zip: JACKSONVILLE, FL 32204 US

Title: MGR ( ) Delete  
Name: HYMAN, MICHAEL  
Address: 7000 WEST ATLANTIC AVENUE  
City-St-Zip: DELRAY BEACH, FL 33446 US

Title: MGR ( ) Delete  
Name: HUGHES, WARREN J  
Address: 8141 54TH AVENUE NORTH  
City-St-Zip: ST. PETERSBURG, FL 33709 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR (X) Change ( ) Addition  
Name: SURFACE, JR., JAMES F  
Address: 1021 OAK STREET  
City-St-Zip: JACKSONVILLE, FL 32204 US

Title: MGR (X) Change ( ) Addition  
Name: HYMAN, MICHAEL D  
Address: 7000 WEST ATLANTIC AVENUE  
City-St-Zip: DELRAY BEACH, FL 33446 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: J FRANK SURFACE JR

MGR

03/07/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date